Schedule E)	FOR SE OF FORM 24/48
AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)	C C00553560
	C 00033300
check if 24-hour report	on 09 / 18 / 2016
Full Name of Payee	Date of Public Distribution/Dissemination
CONSOLIDATED MAILING SERVICES	03 23 2016
Mailing Address 504 SHAW RD	America
SUITE 206	Amount
City State Zip Code	1162.38
STERLING VA 20166	Transaction ID : SE.46232 Date of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL  Category/ Type 004	03 / 23 / 2016
Name of Federal Candidate Support Office	e Sought:
THOMAS EARL JR. EMMER Oppose	President Senate State: MN
Calcindar Toda to Bato	ursement For: Primary <b>X</b> General
Per Election for Office Sought 2133.48 2016	Other (specify) ▶
Full Name of Payee CONSOLIDATED MAILING SERVICES	Date of Public Distribution/Dissemination
CONSOCIDATED IVIAICING SERVICES	03 23 2016
Mailing Address 504 SHAW RD	Amount
SUITE 206	,
City State Zip Code	1162.39
STERLING VA 20166	Transaction ID: SE.46233  Date of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL  Category/ 004	03 23 2016
Type 004	25 2510
	e Sought:   House District: 00
RYAN K ZINKE Oppose	President Senate State: MT
2016	ursement For: Primary X General
Per Election for Office Sought 2133.49 2016	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	2324.77
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	·
SCOTT B MACKENZIE	M / D D / Y T Y T Y
Signature [Electronically Filed] Date 0	9 18 2016
-	

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 ¥ 48-hour report New report | X | Amends report filed on Check if 24-hour report 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination CONSOLIDATED MAILING SERVICES 2016 03 23 Mailing Address 504 SHAW RD Amount SUITE 206 State Zip Code City 1162.39 VA 20166 Transaction ID: SE.46234 **STERLING** Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 23 **x** ∣ House × Support Office Sought: District: WILLIAM HURD ΤX Oppose President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 1787.50 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination CONSOLIDATED MAILING SERVICES 03 23 2016 Mailing Address 504 SHAW RD Amount SUITE 206 City State Zip Code 1162.39 **STERLING** VA Transaction ID: SE.46235 20166 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 04 **✗** Support Office Sought: **✗** House District: MIA LOVE UT Oppose President Senate State: Primary ✗ General Calendar Year-To-Date Disbursement For: 1787.50 2016 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 2324.78 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature

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schedule E)	FOR SE OF FORM 24/48			
AME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼				
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)				
	C C00553560			
heck if 24-hour report 48-hour report New report Amends report filed of	on 09 / 18 / 2016			
Full Name of Payee	Date of Public Distribution/Dissemination			
CONSOLIDATED MAILING SERVICES	03 23 2016			
Mailing Address 504 SHAW RD	25 2510			
SUITE 206	Amount			
City State Zip Code	1162.39			
STERLING VA 20166	Transaction ID : SE.46236 Date of Disbursement or Obligation			
Purpose of Expenditure VOTER CONTACT MAIL  Category/ Type 004	03 / 23 / 2016			
Name of Federal Candidate Support Office	Sought:			
ALEXANDER XAVIER MOONEY Oppose	President Senate State: WV			
Calendar Year-To-Date Per Election for Office Sought  Disbur 2016	sement For: Primary <b>X</b> General  Other (specify) ▶			
Full Name of Payer				
Full Name of Payee CONSOLIDATED MAILING SERVICES  Date of Public Distribution/Dissemination  03 23 2016				
Mailing Address 504 SHAW RD	20 2010			
SUITE 206	Amount			
City State Zip Code	1162.38			
STERLING VA 20166	Transaction ID : SE.46237 Date of Disbursement or Obligation			
Purpose of Expenditure VOTER CONTACT MAIL  Category/ Type  004	03 / 23 / 2016			
Name of Federal Candidate Support Office	Sought: House District: 00			
BENJAMIN E SASSE Oppose	President X Senate State: NE			
Calendar Year-To-Date Per Election for Office Sought  Disbut 2020	rsement For: Primary			
1 St. Eastern St. St. St. St. St.				
	Other (specify) -			
(a) SUBTOTAL of Itemized Independent Expenditures	Other (specify)   2324.77			
(a) SUBTOTAL of Itemized Independent Expenditures				
(b) SUBTOTAL of Unitemized Independent Expenditures	2324.77  de in cooperation, consultation, or concert			
(b) SUBTOTAL of Unitemized Independent Expenditures	de in cooperation, consultation, or concert or (if the reporting entity is not a political			

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 ¥ 48-hour report New report | X | Amends report filed on Check if 24-hour report 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination CONSOLIDATED MAILING SERVICES 2016 03 23 Mailing Address 504 SHAW RD Amount SUITE 206 State Zip Code City 1162.38 VA 20166 Transaction ID: SE.46238 **STERLING** Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 00 × Support Office Sought: House District: **KELLY A AYOTTE** NH Oppose **X** Senate President State: Disbursement For: Primary **✗** General Calendar Year-To-Date 1787.50 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination CONSOLIDATED MAILING SERVICES 03 23 2016 Mailing Address 504 SHAW RD Amount SUITE 206 City State Zip Code 1162.38 **STERLING** VA Transaction ID: SE.46239 20166 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: **ROB PORTMAN** OH Oppose President Senate State: ✗ General Calendar Year-To-Date Disbursement For: Primary 1787.50 2016 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 2324.76 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature

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FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 ¥ 48-hour report New report | X | Amends report filed on Check if 24-hour report 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination CONSOLIDATED MAILING SERVICES 2016 03 23 Mailing Address 504 SHAW RD Amount SUITE 206 State Zip Code City 1162.38 VA 20166 Transaction ID: SE.46240 **STERLING** Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 00 × Support Office Sought: House District: PATRICK JOSEPH TOOMEY PΑ Oppose **X** Senate President State: Disbursement For: Primary **✗** General Calendar Year-To-Date 1787.49 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination CONSOLIDATED MAILING SERVICES 03 23 2016 Mailing Address 504 SHAW RD Amount SUITE 206 City State Zip Code 1162.38 **STERLING** VA Transaction ID: SE.46241 20166 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: TIMOTHY E SCOTT SC Oppose President Senate State: ✗ General Calendar Year-To-Date Disbursement For: Primary 1787.50 2016 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 2324.76 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature

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NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)  Check if 24-hour report  48-hour report  2016  Check if 24-hour report  48-hour report  48-ho	\
Check if	า ₹
Check if 24-hour report	
CONSOLIDATED MAILING SERVICES  Mailing Address 504 SHAW RD SUITE 206  City State Zip Code STERLING VA 20166  Purpose of Expenditure VOTER CONTACT MAIL  Name of Federal Candidate RONALD HAROLD JOHNSON  Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee DIRECT SUPPORT SERVICES INC  Mailing Address 1155-15TH STREET NW SUITE 410  City State Zip Code WASHINGTON  DC 20005  Praid V 2016  Amount  Transaction ID: SE.46242 Date of Disbursement or Obligation  Office Sought: House District: 0 Office Sought: House District: 0 Other (specify) ▶  Date of Public Distribution/Dissemination  Amount  Transaction ID: SE.46243 Date of Disbursement or Obligation  Transaction ID: SE.46243 Date of Disbursement or Obligation  Amount  Transaction ID: SE.46243 Date of Disbursement or Obligation  Calegory/ OXIVER ON TACT MAIL  City State Zip Code Date of Public Distribution/Dissemination  Transaction ID: SE.46243 Date of Disbursement or Obligation  Calegory/ OXIVER ON TACT MAIL  Calegory/ OXIVER ON TACT MAIL  City Calegory/ OXIVER ON TACT MAIL  Calegory/ OXIVER ON TACT MAIL  Amount	Y
Mailing Address 504 SHAW RD SUITE 206  City State Zip Code STERLING VA 20166  Purpose of Expenditure VOTER CONTACT MAIL  Name of Federal Candidate RONALD HAROLD JOHNSON  Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee DIRECT SUPPORT SERVICES INC  Mailing Address  1155 - 15TH STREET NW SUITE 410  City State Zip Code  Transaction ID : SE.46242 Date of Disbursement or Obligation  Office Sought: House District: O Other (specify) ▶  Date of Public Distribution/Dissemination  Amount  Transaction ID : SE.46242 Date of Disbursement For: Primary X Gen Other (specify) ▶  Full Name of Payee DIRECT SUPPORT SERVICES INC  Mailing Address  1155 - 15TH STREET NW SUITE 410  City State Zip Code  VASHINGTON  Category/  C	n
SUITE 206  City State Zip Code 1162.38  STERLING VA 20166  Purpose of Expenditure VOTER CONTACT MAIL  Name of Federal Candidate RONALD HAROLD JOHNSON  Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee DIRECT SUPPORT SERVICES INC  Mailing Address 1155 - 15TH STREET NW SUITE 410  City State Zip Code  WASHINGTON  DC 20005  Transaction ID: SE.46242 Date of Disbursement or Obligation  Oppose President X Senate State: W  Disbursement For: Primary X Gen 2016  Other (specify) ▶  Date of Public Distribution/Dissemination  Amount  Transaction ID: SE.46243 Date of Disbursement or Obligation  Transaction ID: SE.46243 Date of Disbursement or Obligation  Transaction ID: SE.46243 Date of Disbursement or Obligation  Purpose of Expenditure  Category/ 004	Y
State Zip Code  STERLING  VA  20166  Transaction ID: SE.46242  Date of Disbursement or Obligation  Purpose of Expenditure  VOTER CONTACT MAIL  Name of Federal Candidate  RONALD HAROLD JOHNSON  Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee  DIRECT SUPPORT SERVICES INC  Mailing Address  1155 - 15TH STREET NW  SUITE 410  City  WASHINGTON  DC  20005  Transaction ID: SE.46242  Date of Disbursement or Obligation  Oppose  President  Senate  State: W  2016  Other (specify)  Date of Public Distribution/Dissemination  Amount  Transaction ID: SE.46242  Date of Disbursement For: Primary  Sultre 410  City  State  Zip Code  Transaction ID: SE.46243  Date of Disbursement or Obligation  Transaction ID: SE.46243  Date of Disbursement or Obligation  Transaction ID: SE.46243  Date of Disbursement or Obligation  Purpose of Expenditure  VOTER CONTACT MAIL	_
STERLING  VA  20166  Transaction ID: SE.46242  Date of Disbursement or Obligation  Purpose of Expenditure  VOTER CONTACT MAIL  Name of Federal Candidate  RONALD HAROLD JOHNSON  Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee  DIRECT SUPPORT SERVICES INC  Mailing Address  1155 - 15TH STREET NW  SUITE 410  City  State  Zip Code  President  Mailing Address  1155 - 15TH STREET NW  SUITE 410  City  State  Zip Code  Pransaction ID: SE.46242  Date of Disbursement or Obligation  Transaction ID: SE.46243  Date of Disbursement or Obligation  Amount  Transaction ID: SE.46243  Date of Disbursement or Obligation  Transaction ID: SE.46243  Date of Disbursement or Obligation  Category/  Other (specify) ▶  Category/  Other (specify) ▶  Transaction ID: SE.46243  Date of Disbursement or Obligation  Category/  Other (specify) ▶  Category/  Other (specify) ▶  Category/  Other (specify) ▶  Category/  Other (specify) ▶  Category/  Category/  Other (specify) ▶  Cat	
Purpose of Expenditure VOTER CONTACT MAIL  Category/ Type 004  Cat	
RONALD HAROLD JOHNSON  Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee DIRECT SUPPORT SERVICES INC  Mailing Address  1155 - 15TH STREET NW SUITE 410  City  State  Zip Code WASHINGTON  DC  2016  Category/ Category/ Contract Mall	Y
Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee DIRECT SUPPORT SERVICES INC  Mailing Address  1155 - 15TH STREET NW SUITE 410  City  WASHINGTON  Purpose of Expenditure VOTER CONTACT MAIL  Calendar Year-To-Date President  I Senate State:  Disbursement For: Primary  A Gen 2016  Other (specify)  Date of Public Distribution/Dissemination  Amount  Amount  Transaction ID: SE.46243 Date of Disbursement or Obligation  Category/  Out  Category/  Out  Category/  Out  Category/ Out	0
Per Election for Office Sought  Full Name of Payee DIRECT SUPPORT SERVICES INC  Mailing Address  1155 - 15TH STREET NW SUITE 410  City  State  Zip Code WASHINGTON  Purpose of Expenditure  VOTER CONTACT MAIL  Per Election for Office Sought  1787.49  Date of Public Distribution/Dissemination  Amount  Amount  Transaction ID: SE.46243  Date of Disbursement or Obligation  Category/  Category/  Category/  Control Office Sought  Date of Public Distribution/Dissemination  Amount  Category/  Catego	<u>'l</u>
Full Name of Payee DIRECT SUPPORT SERVICES INC  Mailing Address  1155 - 15TH STREET NW SUITE 410  City State Zip Code WASHINGTON  Purpose of Expenditure VOTER CONTACT MAIL  Other (specify)  Date of Public Distribution/Dissemination  Amount  Amount  Transaction ID: SE.46243 Date of Disbursement or Obligation  Category/  Category/  Code  Category/  Category/  Code  Category/  Cate	eral
DIRECT SUPPORT SERVICES INC  Mailing Address  1155 - 15TH STREET NW SUITE 410  City  WASHINGTON  DC  20005  Purpose of Expenditure VOTER CONTACT MAIL  Category/  Cat	
Mailing Address  1155 - 15TH STREET NW SUITE 410  City State Zip Code WASHINGTON DC 20005  Purpose of Expenditure VOTER CONTACT MAIL  Category/ CONTACT MAIL  Amount  Transaction ID : SE.46243 Date of Disbursement or Obligation	
SUITE 410  City State Zip Code  WASHINGTON DC 20005  Purpose of Expenditure  VOTER CONTACT MAIL  Category/ 004  Category/ 004	الد
WASHINGTON DC 20005  Transaction ID : SE.46243 Date of Disbursement or Obligation  Purpose of Expenditure VOTER CONTACT MAIL  Category/ 004	
Purpose of Expenditure  VOTER CONTACT MAIL  Category/	
VOTER CONTACT MAIL	
	Y
Name of Federal Candidate    Support Office Sought:   House District:	06
THOMAS EARL JR. EMMER Oppose President Senate State: M	N
Calendar Year-To-Date Per Election for Office Sought  Disbursement For:   Primary   Gen  2016  Other (specify) ▶	eral
Cutof (specify)?	
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or conc with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a politic party committee) any political party committee or its agent.	
SCOTT B MACKENZIE  [Electronically Filed] Date 09 18 2016	
Signature	

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OF

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FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 ¥ 48-hour report New report | X | Amends report filed on Check if 24-hour report 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination DIRECT SUPPORT SERVICES INC 2016 03 23 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** State Zip Code City 504.10 DC 20005 Transaction ID: SE.46244 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 00 **x** ∣ House X Support Office Sought: District: RYAN K ZINKE ΜT Oppose President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 850.09 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination DIRECT SUPPORT SERVICES INC 03 23 2016 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** City State Zip Code 504.10 WASHINGTON DC Transaction ID: SE.46245 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 23 **✗** Support Office Sought: **✗** House District: WILLIAM HURD TΧ Oppose President Senate State: Primary ✗ General Calendar Year-To-Date Disbursement For: 2016 504.10 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 1008.20 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature

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#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	DITORIES	PAGE 8 OF 22 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)  FEC IDENTIFICATION NUMBER ▼			
C C00553560			
Check if 24-hour report 48-hour report New re	eport X Amends report file	ed on 09 / 18 2016	
Full Name of Payee DIRECT SUPPORT SERVICES INC		Date of Public Distribution/Dissemination  03	
Mailing Address 1155 - 15TH STREET NW		Amount	
SUITE 410 City State	Zip Code	504.10	
WASHINGTON DC	20005	Transaction ID : SE.46246 Date of Disbursement or Obligation	
Purpose of Expenditure VOTER CONTACT MAIL	Category/ Type 004	03 / 23 / 2016	
Name of Federal Candidate	<b>✗</b> Support Off	ice Sought: X House District: 04	
MIA LOVE	Oppose	President Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought	504.10 Dis	bursement For: Primary ★ General  Other (specify) ►	
Full Name of Payee		Date of Public Distribution/Dissemination	
DIRECT SUPPORT SERVICES INC		03 / 23 / 2016	
Mailing Address 1155 - 15TH STREET NW		Amount	
SUITE 410 City State	Zip Code	504.10	
WASHINGTON DC	20005	Transaction ID : SE.46247 Date of Disbursement or Obligation	
Purpose of Expenditure VOTER CONTACT MAIL	Category/ Type 004	03 / 23 / Y Y Y Y Y Y 2016	
Name of Federal Candidate	<b>✗</b> Support Off	ice Sought: X House District: 02	
ALEXANDER XAVIER MOONEY	Oppose	President Senate State: WV	
Calendar Year-To-Date Per Election for Office Sought	504.10 Dis	Sbursement For:  Primary	
(a) CURTOTAL of Itamized Independent Expanditures		1400.00	
(a) SUBTOTAL of Itemized Independent Expenditures	·····	1008.20	
(b) SUBTOTAL of Unitemized Independent Expenditures	·····		
(c) TOTAL Independent Expenditures	·····		
Under penalty of perjury I certify that the independent expenditur with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.			
SCOTT B MACKENZIE  [Electronic Signature]	conically Filed] Date	09 18 2016	
Gigilaturo			

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 ¥ 48-hour report New report | X | Amends report filed on Check if 24-hour report 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination DIRECT SUPPORT SERVICES INC 2016 03 23 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** State Zip Code City 504.11 DC 20005 Transaction ID: SE.46248 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 00 × Support Office Sought: House District: BENJAMIN E SASSE ΝE Oppose **X** Senate President State: Disbursement For: Primary **✗** General Calendar Year-To-Date 504.11 2020 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination DIRECT SUPPORT SERVICES INC 03 23 2016 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** City State Zip Code 504.11 WASHINGTON DC Transaction ID: SE.46249 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: **KELLY A AYOTTE** NH Oppose President Senate State: ✗ General Calendar Year-To-Date Disbursement For: Primary 2016 504.11 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 1008.22 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature

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Scl	hedule E)			PAGE 10 OF 22 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full) IGOP (VIRGIN ISLANDS REPUBLICAN PART)	Y)		FEC IDENTIFICATION NUMBER ▼  C C00553560
Che	eck if 24-hour report 48-hour report New report	ort 🗶 Amends repo	rt filed on	09 18 2016
	Full Name of Payee DIRECT SUPPORT SERVICES INC		Date	e of Public Distribution/Dissemination
	Mailing Address 1155 - 15TH STREET NW SUITE 410		Amo	
ŀ		7:- 0-40		504.44
	WASHINGTON DC	Zip Code 20005		504.11  nsaction ID : SE.46250  e of Disbursement or Obligation
	Purpose of Expenditure VOTER CONTACT MAIL	Category/ Type 004		03 / 23 / 2016
ŀ	Name of Federal Candidate	<b>✗</b> Support	Office Soug	ght: House District: 00
	ROB PORTMAN	Oppose		ident Senate State: OH
	Calendar Year-To-Date Per Election for Office Sought	504.11	Disburseme 2016	ent For: Primary <b>X</b> General  Other (specify) ▶
	Full Name of Payee DIRECT SUPPORT SERVICES INC		Date	e of Public Distribution/Dissemination
	Mailing Address 1155 - 15TH STREET NW SUITE 410		Amo	ount
ŀ	City State	Zip Code	-	504.10
	WASHINGTON DC	20005	<b>I</b>	saction ID : SE.46251 e of Disbursement or Obligation
	Purpose of Expenditure VOTER CONTACT MAIL	Category/ Type 004	コート	03 23 2016
ľ	Name of Federal Candidate	<b>x</b> Support	Office Sou	ight: House District: 00
	PATRICK JOSEPH TOOMEY	Oppose		sident Senate State: PA
	Calendar Year-To-Date Per Election for Office Sought	504.10	Disburseme 2016	ent For: Primary General  Other (specify)
(6	(a) SUBTOTAL of Itemized Independent Expenditures		. [	1008.21
(1	(b) SUBTOTAL of Unitemized Independent Expenditures			
(0	(c) TOTAL Independent Expenditures		• [	
W	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.	•		•
	SCOTT B MACKENZIE  [Electroni	cically Filed] Date	M = M   09	18 2016
	Signature		- 7	

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 ¥ 48-hour report New report | X | Amends report filed on Check if 24-hour report 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination DIRECT SUPPORT SERVICES INC 2016 03 23 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** State Zip Code City 504.11 DC 20005 Transaction ID: SE.46252 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: TIMOTHY E SCOTT SC Oppose **X** Senate President State: Disbursement For: Primary **✗** General Calendar Year-To-Date 504.11 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination DIRECT SUPPORT SERVICES INC 03 23 2016 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** City State Zip Code 504.10 WASHINGTON DC Transaction ID: SE.46253 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: RONALD HAROLD JOHNSON WI Oppose President Senate State: ✗ General Calendar Year-To-Date Disbursement For: Primary 504.10 2016 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 1008.21 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature

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Schedule E)		PAGE 12 OF 22 FOR SE OF FORM 24/48
AME OF COMMITTEE (In Full)	57.0	FEC IDENTIFICATION NUMBER ▼
VIGOP (VIRGIN ISLANDS REPUBLICAN PA	RTY)	C C00553560
heck if 24-hour report X 48-hour report New	report X Amends report	filed on 09 18 2016
Full Name of Payee DSSI		Date of Public Distribution/Dissemination
D331		03 23 2016
Mailing Address 1155 - 15TH STREET NW		Amount
SUITE 410		
City State WASHINGTON DC	Zip Code 20005	121.01 Transaction ID : SE.46254
	20005	Date of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL	Category/ Type 004	03 / 23 / 2016
Name of Federal Candidate	<b>X</b> Support (	Office Sought:
THOMAS EARL JR. EMMER	Oppose	President Senate State: MN
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General
	7	Other (specify)
Full Name of Payee  DSSI		Date of Public Distribution/Dissemination
Mailing Address 1155 - 15TH STREET NW		03 23 2016
SUITE 410		Amount
City State	Zip Code	121.01
WASHINGTON DC	20005	Transaction ID : SE.46255  Date of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL	Category/ Type 004	03 / 23 / 2016
Name of Federal Candidate	<b>x</b> Support (	Office Sought:  House District: 00
RYAN K ZINKE	Oppose	President Senate State: MT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2016
	,	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures		242.02
(b) SUBTOTAL of Unitemized Independent Expenditures		<b>&gt;</b>
(c) TOTAL Independent Expenditures		•
		7 7
Under penalty of perjury I certify that the independent expendit with, or at the request or suggestion of, any candidate or autho party committee) any political party committee or its agent.		
SCOTT B MACKENZIE [Elec	ctronically Filed] Date	09 18 2016
Signature		

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 24-hour report ¥ 48-hour report New report | X | Amends report filed on Check if 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination DSSI 2016 03 23 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** State Zip Code City 121.01 DC 20005 Transaction ID: SE.46256 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 23 **X** House **✗** Support Office Sought: District: WILLIAM HURD ΤX Oppose President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 625.11 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination DSSI 03 23 2016 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** City State Zip Code 121.01 WASHINGTON DC Transaction ID: SE.46257 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 04 **✗** Support Office Sought: **✗** House District: MIA LOVE UT Oppose President Senate State: Primary **X** General Calendar Year-To-Date Disbursement For: 2016 625.11 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 242.02 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature

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FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 24-hour report ¥ 48-hour report New report | X | Amends report filed on Check if 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination DSSI 2016 03 23 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** State Zip Code City 121.01 DC 20005 Transaction ID: SE.46258 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 02 **X** House **✗** Support Office Sought: District: ALEXANDER XAVIER MOONEY WV Oppose President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 625.11 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination DSSI 03 23 2016 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** City State Zip Code 121.01 WASHINGTON DC Transaction ID: SE.46259 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: BENJAMIN E SASSE NE Oppose President Senate State: **X** General Calendar Year-To-Date Disbursement For: Primary 2020 625.12 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 242.02 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature

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#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	ZXI EIVDI	101120		PAGE 15 OF 22 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)  ALCOD (ALDO IN ISLANDS DEDITED ICAN DARTY)  FEC IDENTIFICATION NUMBER ▼				
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)  C C00553560				C C00553560
Check if 24-hour report X 48-hour report	New repo	ort X Amends repo		9 18 2016
Full Name of Payee			Date of	f Public Distribution/Dissemination
DSSI Mailing Address				03 23 2016
Mailing Address 1155 - 15TH STREET NW			Amoun	t
SUITE 410	oto	7in Codo		404.04
<b>I</b> '	ate DC	Zip Code 20005	Transa	121.01 action ID : SE.46260
		20000		f Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004		03 / 23 / Y Y Y Y Y Y Y
Name of Federal Candidate		<b>x</b> Support	Office Sought	: House District: 00
KELLY A AYOTTE		Oppose	Preside	NII I
Calendar Year-To-Date Per Election for Office Sought		625.12	Disbursement 2016 Ott	For: Primary <b>X</b> General her (specify) ▶
Full Name of Payee			Date o	f Public Distribution/Dissemination
DSSI				03 23 2016
Mailing Address 1155 - 15TH STREET NW			Amour	nt
SUITE 410				
		Zip Code		121.01
WASHINGTON Durpose of Expenditure	DC	20005		ction ID : SE.46261  f Disbursement or Obligation
VOTER CONTACT MAIL		Category/ Type 004		03 / 23 / 2016
Name of Federal Candidate		<b>✗</b> Support	Office Sought	: House District:00
ROB PORTMAN		Oppose	Preside	nt Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		625.12	Disbursement 2016 Ot	For: Primary ★ General her (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures				242.02
(-)				7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	S		•	7 7 7
(c) TOTAL Independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the independent e with, or at the request or suggestion of, any candidate o party committee) any political party committee or its ager	or authorized			
SCOTT B MACKENZIE Signature	[Electroni	cally Filed] Date	M M / 09	18 2016
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chedule E)		PAGE 16 OF 22 FOR SE OF FORM 24/48
AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
VIGOP (VIRGIN ISLANDS REPUBLICAN PART	Y)	C C00553560
		0 00000000
heck if 24-hour report 🗶 48-hour report New rep	ort X Amends report	filed on 09 18 2016
Full Name of Payee		Date of Public Distribution/Dissemination
DSSI		03 23 2016
Mailing Address 1155 - 15TH STREET NW		Amount
SUITE 410		Amount
City State	Zip Code	121.01
WASHINGTON DC	20005	Transaction ID : SE.46262  Date of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL	Category/ Type 004	03 / 23 / 2016
Name of Federal Candidate	<b>✗</b> Support	Office Sought: House District: 00
PATRICK JOSEPH TOOMEY	Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General
Full Name of Payee		Other (specify)
DSSI		Date of Public Distribution/Dissemination
Mailing Address 1155 - 15TH STREET NW		03 23 2016
SUITE 410		Amount
City State	Zip Code	121.01
WASHINGTON DC	20005	Transaction ID : SE.46263  Date of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL	Category/ Type 004	03 / 23 / 2016
Name of Federal Candidate	<b>x</b> Support	Office Sought: House District: 00
TIMOTHY E SCOTT	Oppose	President Senate State: SC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary   General  Other (specify) ▶
, , ,		Guier (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		242.02
(b) SUBTOTAL of Unitemized Independent Expenditures		<b>&gt;</b>
(c) TOTAL Independent Expenditures		·
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	ically Filed] Date	09 18 2016
Signature		

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 24-hour report ¥ 48-hour report New report | X | Amends report filed on Check if 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination DSSI 2016 03 23 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** State Zip Code City 121.01 DC 20005 Transaction ID: SE.46264 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: **RONALD HAROLD JOHNSON** WI Oppose **X** Senate President State: Disbursement For: Primary **✗** General Calendar Year-To-Date 625.11 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 03 23 2016 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** City State Zip Code 345.99 WASHINGTON DC Transaction ID: SE.46208 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 06 **✗** Support Office Sought: **✗** House District: THOMAS EARL JR. EMMER MN Oppose President Senate State: Primary **X** General Calendar Year-To-Date Disbursement For: 2016 345.99 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 467.00 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature

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FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 ¥ 48-hour report New report | X | Amends report filed on Check if 24-hour report 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 2016 03 23 Mailing Address 1155 - 15TH STREET NW Amount SUITE 410 State Zip Code City 345.99 DC 20005 Transaction ID: SE.46209 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 00 **X** House **✗** Support Office Sought: District: RYAN K ZINKE ΜT Oppose President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 345.99 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 03 23 2016 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** City State Zip Code 345.99 WASHINGTON DC Transaction ID: SE.46210 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 23 **✗** Support Office Sought: **✗** House District: WILLIAM HURD TΧ Oppose President Senate State: Primary ✗ General Calendar Year-To-Date Disbursement For: 2016 0.00 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 691.98 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature

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FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 ¥ 48-hour report New report | X | Amends report filed on Check if 24-hour report 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 2016 03 23 Mailing Address 1155 - 15TH STREET NW Amount SUITE 410 State Zip Code City 345.99 DC 20005 Transaction ID: SE.46211 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 04 **x** ∣ House **✗** Support Office Sought: District: MIA LOVE UT Oppose President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 0.00 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 03 23 2016 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** City State Zip Code 345.99 WASHINGTON DC Transaction ID: SE.46212 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 02 **✗** Support Office Sought: **✗** House District: ALEXANDER XAVIER MOONEY WV Oppose President Senate State: Primary ✗ General Calendar Year-To-Date Disbursement For: 2016 0.00 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 691.98 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature

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FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 ¥ 48-hour report New report | X | Amends report filed on Check if 24-hour report 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 2016 03 23 Mailing Address 1155 - 15TH STREET NW Amount SUITE 410 State Zip Code City 345.99 DC 20005 Transaction ID: SE.46213 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: BENJAMIN E SASSE ΝE Oppose **X** Senate President State: Disbursement For: Primary **✗** General Calendar Year-To-Date 0.00 2020 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 03 23 2016 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** City State Zip Code 345.99 WASHINGTON DC Transaction ID: SE.46214 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: **KELLY A AYOTTE** NH Oppose President Senate State: ✗ General Calendar Year-To-Date Disbursement For: Primary 2016 0.00 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 691.98 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature

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PAGE 22 OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 ¥ 48-hour report New report | X | Amends report filed on Check if 24-hour report 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 2016 03 23 Mailing Address 1155 - 15TH STREET NW Amount SUITE 410 State Zip Code City 346.00 DC 20005 Transaction ID: SE.46215 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: **ROB PORTMAN** OH Oppose **X** Senate President State: Disbursement For: Primary **✗** General Calendar Year-To-Date 0.00 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 03 23 2016 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** City State Zip Code 346.00 WASHINGTON DC Transaction ID: SE.46216 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: PATRICK JOSEPH TOOMEY PΑ Oppose President Senate State: ✗ General Calendar Year-To-Date Disbursement For: Primary 2016 0.00 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 692.00 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature

PAGE 22 22 OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 ¥ 48-hour report New report | X | Amends report filed on Check if 24-hour report 09 2016 18 Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 2016 03 23 Mailing Address 1155 - 15TH STREET NW Amount SUITE 410 State Zip Code City 345.99 DC 20005 Transaction ID: SE.46217 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 03 23 2016 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: TIMOTHY E SCOTT SC Oppose **X** Senate President State: Disbursement For: Primary **✗** General Calendar Year-To-Date 0.00 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 03 23 2016 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** City State Zip Code 346.00 WASHINGTON DC Transaction ID: SE.46218 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 03 23 Type Name of Federal Candidate 00 **✗** Support Office Sought: House District: RONALD HAROLD JOHNSON WI Oppose President Senate State: ✗ General Calendar Year-To-Date Disbursement For: Primary 2016 0.00 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 691.99 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... 23468.39 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 09 18 2016 Date Signature